



*Delaware Health
And Social Services*

DIVISION OF MANAGEMENT SERVICES

PROCUREMENT

DATE: AUGUST 8, 2008

PSC#828

SOCIAL MARKETING IN SUPPORT OF THE DELAWARE
HEALTHY MOTHER & INFANT CONSORTIUM AND DIVISION OF
PUBLIC HEALTH MATERNAL & CHILD HEALTH INITIATIVES

FOR

DIVISION OF PUBLIC HEALTH

Date Due: SEPTEMBER 16, 2008
11:00 AM

ADDENDUM # 1

Please Note:

THE ATTACHED SHEETS HEREBY BECOME A PART OF
THE ABOVE MENTIONED BID.

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	QUESTION	RESPONSE
1	How much funding is available for this project? The answer will affect the potential solutions that Bidders propose.	The annual budget range for the project is \$150,000 - \$245,000
2	Will DPH choose 1 vendor or multiple vendors?	If one vendor has the best proposal for all the four segments identified under the scope of services (section II A) DPH may select that vendor. DPH may select the best proposal for most of the segments and negotiate improvements on the other segments or DPH may select multiple vendors where each vendor has the best qualified proposal for a specific segment.
3	Please explain the phrase "contractor may be monitored on-site..." Does this mean at the contractor's offices or on-site at a DPH facility? What does DPH hope to accomplish by this?	This is standard language for the boiler plate. It was not written specifically for this RFP. The intent is that DPH has the right to monitor the contractor's compliance with the requirements of the contract and the services provided.
4	Will there be a public bid opening	The bid opening on the due date of September 16, 2008 is open to the public.
5	Does DPH have an incumbent provider for services of this type? If so, can you identify the company or companies?	DPH has used staff and a variety of contractors for different projects. This is the first RFP for this type of services for the Infant Mortality Program.
6	Is there any requirement to use Delaware-certified women-owned, minority-owned or other disadvantaged business enterprises on this contract?	There are no requirements to use Delaware Certified women-owned, minority-owned or other disadvantaged business enterprises on this contract.
7	How will the proposals be scored? What is the Division's evaluation methodology?	Please refer to Section VII. Selection Process (pages 17&18) of the RFP
8	What is the budget for the first year of this project?	Please see response to question #1
9	Can we submit spec creative or will that be unacceptable?	A spec creative that demonstrates the contractor's ability to do the work required is acceptable.
10	Is it advisable to include complete case studies of similar projects or would you prefer simply names of clients and projects?	An executive summary of each similar project not exceeding half a page is acceptable.
11	Why is the target market as old as 50? Is there	Assisted reproductive technology has now made it possible for

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	evidence that women of that age are becoming pregnant?	women to conceive far beyond their normal child bearing years. Age 50 is a convenient cut-off point.
12	Could the contractor help create educational tools like the curriculum you currently give moms in the program?	The contractor is welcome to present any proposal that it deems responsive to the RFP
13	Can you elaborate on what you mean under the Scope of Services when you say create a social marketing plan to identify, create and sustain a constituency? Create a constituency? Would this be an actual group of people or just get people starting a dialogue in general about these issues?	The intent is to develop an active and broad base of support for the effort to fight infant mortality in the state.
14	Would the contractor be responsible for marketing the programs offered by subcontractors? i.e. Would the contractor do the materials for Christiana Care's Healthy Beginnings?	The contractor would market the infant mortality program. The providers – such as Christiana Care's Healthy Beginnings program – provide services in support of the infant mortality program. To the extent that the contractor believes marketing the providers is important to the goal of marketing the infant mortality program, the contractor may include that strategy in their proposal.
15	Noting that the annual budget may change, please advise as to the annual budget allocated to this initiative, at the present time.	Please see response to question #1
16	Please provide background information as to why Delaware appears to lag behind other states in data collection (e.g., FIMR and PRAMS).	Delaware lags behind some states in some areas but leads other states in some areas.
17	Please provide data pertaining to ALL pregnant women within the state of Delaware that could be examined by bidders as follows: <ul style="list-style-type: none">o Age (of first pregnancy)o Ethnicityo Household Income	The annual vital statistics produced by the Delaware Health Statistics Center and several reports produced by the census bureau would be good sources for this data. http://www.dhss.delaware.gov/dhss/dph/hp/2005.html

	<ul style="list-style-type: none"> ○ Geography ○ Education level ○ # of other children in household ○ # of other adults in household 	http://www.census.gov/
18	Within the designated ZIP codes what is the current teen pregnancy rate?	The Delaware Health Statistics Center would be a good source for that data. http://www.dhss.delaware.gov/dhss/dph/hp/healthstats.html
19	Beyond the information posted on the DHSS site, please provide copies of any propriety research (e.g. focus groups, surveys, etc.) conducted within the past two years with: <ul style="list-style-type: none"> ○ Targeted consumers Influencers of those target audience	The program is not able to provide any such information.
20	Has the Delaware Healthy Mother & Infant Consortium (DHMIC) and Division of Public Health (DPH) Maternal & Child Health Initiative developed a campaign for this effort previously? If yes, can you share background information related to prior initiatives: <ul style="list-style-type: none"> ○ Creative samples ○ Communications plan ○ Results 	The initiative has developed one TV spot on preconception health around the theme “healthy women, healthy babies. The spot was developed in-house and is available at: www.healthybabiesde.com . The spot has been running state-wide since May 2008.
21	In addition, please provide an opinion-based assessment of the effectiveness of programs to date.	In our opinion, the effectiveness of any previous programs is not pertinent to this RFP. The contractor is encouraged to provide their best proposal based on their experience and expertise.
22	What past communications have you tried within these targeted zip codes? How long was the communications active?	Please see response to question 20
23	Have you targeted schools, churches and workplace, e.g., McDonalds, etc.	Please see response to question 20
24	Please provide background as to collateral currently available to Delaware residents that pertains to health information and resources for reducing infant mortality	The program website – www.healthybabiesde.com - provides information on available services. Some providers have developed educational resources that are available to their

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	rates: Distribution channels	patients.
	Samples	
25	Please provide information related to any call center line/toll-free phone number(s) and/or website(s) that have been established to provide consumer information.	The program website is at www.healthybabiesde.com . The Delaware Help Line is serves as a call center for several programs, including the infant mortality program. The number is 1-800-464-HELP (1-800-464-4357)
26	If so, will we be building this site? If we are building the microsite, where will it be hosted? What language does it have to be written in?	If a contractor considers a microsite an appropriate strategy the contractor may want to submit a proposal that includes recommendations on language and how it would be hosted.
27	If there will be a microsite, but we are not building it, will we have input as it pertains to the campaign?	Please see response to question 26
28	If there will not be a microsite where should the campaign direct people for more information?	Please see response to question 26
29	Is the call center line used for awareness only or are you directing them to Planned Parenthood, healthcare centers, etc.; and, do they get profile and sent a communication? Is this a means towards tracking compliance, etc.	The call center directs callers to providers by zip code.
30	Have you had strategic partnerships with major businesses, e.g., Wal-Mart, etc	No
31	Specifically, what are the short-term and long-term objectives for this campaign? In other words, how will success of the campaign be measured?	1) Improve awareness of the problem of infant mortality. 2) Educate the community on the importance of preconception health. 3.) Direct the community to available resources. 4) Improve and sustain community interest in the effort to address infant mortality.
32	In preparation of RFP response, and to foster “apples-to-apples” comparative of RFP responses, please provide the timeframe (e.g., 12 months) that respondents should base their RFP submissions upon.	The initial award will be for one year with possible renewals for up to two additional years.
33	In preparation of RFP response, and to foster “apples-to-apples” comparative of RFP responses, please provide the planning budget (or budget range) that respondents should base their RFP submissions upon.	Please see response to question #1

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34	What is the annual budget for this project? Are you expecting that the budget will be the same for each subsequent contract period?	Please see response to question #1. The expectation that budgets will be constant from year to year.
35	Does the scope of services and associated budget include printing?	Yes
36	Are media placement costs included in the budget?	Yes
37	Other than annual reports, are there any existing marketing materials for this program? If so, is the contractor expected to incorporate these materials into new strategies?	Please see response to question 24 The contractor may, at their discretion, or include exclude any materials in their proposed strategies.
38	Are you expecting the annual reports to be unique each year? Or are you wanting to basically stick with the 2007 template creating a sort of "family" with the graphics?	The contractor is encouraged to present their recommendation in their proposal.
39	1. Are you currently working with an agency to market this program? If so, Who is the agency? How long have you been working with them? Are you happy with their service?	No.
40	I had a couple of quick reads through the RFP and I am unable to find the funding allocation for this RFP. Could you please inform me of same.	Please see response to question #1
41	What is the budget for the Infant Mortality Social Marketing Campaign - PSCO-828? Thank you.	Please see response to question #1
42	After reviewing the 2005 and 2008 reports why is there such an interest in a media campaign considering all the infrastructure and grass roots work done so successfully to date?	The contractor is encouraged to present their best recommendations in their proposal.
43	There is no mention of a budget for this program. In order to develop strategies and tactics against the	Please see response to question #1.

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	stated goals, some order of magnitude regarding spending would be helpful.	
44	Is there an incumbent providing marketing and community education support?	No
45	Beyond what's in the annual report are there campaigns that have been produced and if so where can we see them?	Please see response to question 20
46	If campaigns have been produced can we see the media plans that supported them.	There has not been a campaign developed. See the response to question #20.
47	Is there any research, either secondary or primary, available that we could review?	The program is not able to provide any such information
48	Have any public relations activities been undertaken? And if so where can we find the releases?	None
49	Has a web strategy been developed yet?	The program website is www.healthybadiesde.com . The website follows a standard template for agencies within the Department of Health and Social Services.
50	Are there connections to existing programs (tobacco and its effects on low birth weights/ fetal health?)	Yes
51	Are there other states whose programs seem, to you, to be "best practices" and/or very successful? If so, which are they?	The area of preconception health is relatively new. The CDC is still developing guidelines in this area. Many states are in a position similar to Delaware.
52	What is the budget for the Infant Mortality Social Marketing Campaign - PSCO-828?	Please see response to #1
53	Is this RFP a rebid of an existing project, or is this the first implementation of task force recommendation 15? If the former, who is the current vendor? Are they eligible to bid on this current opportunity? Why/why not?	This is the first RFP on recommendation 15 of the Infant Mortality Task Force.
54	What is the state's budget for this project? Of that, what percentage of the budget does the state expect to be assigned to a.) media development, b.) media purchasing, and c.) public relations?	Please see response to question #1. The contractor is encouraged to present a proposal that reflects what the contractor thinks is an appropriate allocation of the available resources.
55	Does the state have examples of media materials from previous maternal and child health outreach campaigns that it can share with vendors?	The program is not able to provide any such materials

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56	Is the successful vendor expected to provide coordination services for the annual Maternal & Infant Health Summit?	Yes. The successful vendor will be expected to provide coordination services to the annual DHMIC Summit
57	Will the state require use of "Healthy Women, Healthy Babies" as the tag line for outreach campaign identity, or will other campaign identity concepts be considered?	Contractors are welcome to present their recommendations in their proposal.